County: Rock ROCK COUNTY HEALTH CARE CENTER - FDD PO BOX 351 JANESVILLE 53547 Phone: (6 JANESVILLE 53547 Phone: (608) 757-5000
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 32
Total Licensed Bed Capacity (12/31/00): 32
Number of Residents on 12/31/00: 32 Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? County **FDDs** No No Average Daily Census: 31 32

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	% 	Age Groups	% 	Less Than 1 Year 1 - 4 Years	9. 4 18. 8
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	75. 0	More Than 4 Years	71. 9
Day Servi ces	No	Mental Illness (Org./Psy)	0. 0	65 - 74	15.6		
Respite Care	No	Mental Illness (Other)	0. 0	75 - 84	9. 4		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	***************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & 0ver	0.0	Full-Time Equivalen	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	0.0		100. 0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	0. 0	65 & 0ver	25. 0	[
Transportation	No	Cerebrovascul ar	0. 0			RNs	6. 1
Referral Service	No	Di abetes	0.0	Sex	%	LPNs	4. 8
Other Services	No	Respi ratory	0. 0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	0.0	Male	53. 1	Aides & Orderlies	95. 0
Mentally Ill	No			Female	46. 9		
Provi de Day Programming for			100. 0				
Devel opmentally Disabled	Yes				100. 0		
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Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			0th	0ther		Private Pay			Manageo	l Care	Percent	
	Per Diem			n	Per Diem				Per Diem		Per Diem		1	Per Diem Total			Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	Ŏ	0. 0	\$0.00	Õ	0. 0%
Intermediate				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Dev. Di sabl ed				32 10	00.0	\$142. 27	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	32	100.0%
Traumatic Brain Inj		0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Ventilator-Depender	ıt O	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Total	0	0. 0		32 10	00.0		0	0.0		0	0.0		0	0.0		32	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needing Total Assi stance of Activities of % Totally Percent Admissions from: Number of Private Home/No Home Health 0.0 Daily Living (ADL) Independent One Or Two Staff Resi dents Dependent Private Home/With Home Health 0.0 Baťhi ng 0.0 93.8 6.3 32 Other Nursing Homes 0.0 Dressing 9.4 81.3 9.4 32 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 34.4 32 0.0 **56.** 3 9.4 $\tilde{32}$ Toilet Use 62.5 0.0 37. 5 0.0 32 0.0 Eating *********** **50.** 0 **50.0** 0.0 Other Locations 100 Total Number of Admissions Continence Special Treatments Receiving Respiratory Care Receiving Tracheostomy Care Receiving Suctioning Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 0.0 0.0 Private Home/No Home Health 0.0 Occ/Freq. Incontinent of Bladder 65.6 0.0 Private Home/With Home Health 0.0 Occ/Freq. Incontinent of Bowel **56.** 3 0.0 Other Nursing Homes 0.0 3. 1 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 25.0 Mobility 6.3 Physically Restrained 0.0 43.8 **75.0** 0.0 Other Locations **50.0** Skin Care Other Resident Characteristics 0.0 Deaths 25.0 With Pressure Sores Have Advance Directives 21.9 Total Number of Discharges With Rashes Medi cati ons 0.0 Receiving Psychoactive Drugs (Including Deaths) **50.** 0

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

m1 .	_				
			All Facilties		
Facility	Fac	ilities			
%	%	Ratio	%	Ratio	
96. 9	85. 5	1. 13	84. 5	1. 15	
75. 0	42. 1	1. 78	77. 5	0. 97	
75. 0	19. 5	3. 85	21. 5	3, 49	
		0. 79	124. 3		
		0. 67	126. 1	0. 10	
	9. 2	0.00	49. 9	0.00	
0. 0	0.0	0.00	83. 3	0.00	
25. 0	16. 2	1. 54	87. 7	0. 29	
100. 0	99. 5	1. 01	69. 0	1.45	
0. 0	0. 5	0. 00	22. 6	0.00	
100. 0	99. 3	1. 01	7. 6	13. 09	
0. 0	0. 5	0.00	33. 3	0.00	
0. 0	0. 2	0.00	18. 4	0.00	
39. 4	50. 8	0. 77	49. 4	0.80	
			50. 1		
			7. 2	1. 47	
	75. 0 75. 0 12. 9 12. 9 0. 0 0. 0 25. 0 100. 0 0. 0 100. 0 0. 0 39. 4 50. 0	Facility % % 96. 9 85. 5 75. 0 42. 1 75. 0 19. 5 12. 9 16. 4 12. 9 19. 2 0. 0 9. 2 0. 0 0. 0 25. 0 16. 2 100. 0 99. 5 0. 0 0. 5 100. 0 99. 3 0. 0 0. 5 239. 4 50. 8 50. 0 45. 9	Facility % Ratio 96. 9 85. 5 1. 13 75. 0 42. 1 1. 78 75. 0 19. 5 3. 85 12. 9 16. 4 0. 79 12. 9 19. 2 0. 67 0. 0 9. 2 0. 00 0. 0 0. 0 0. 0 25. 0 16. 2 1. 54 100. 0 99. 5 1. 01 0. 0 99. 5 1. 01 0. 0 99. 3 1. 01 0. 0 0. 5 0. 00 100. 0 99. 3 1. 01 0. 0 0. 5 0. 00 39. 4 50. 8 0. 77 50. 0 45. 9 1. 09	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Facility Facilities Facilities Facilities 96.9 85.5 1.13 84.5 1.15 75.0 42.1 1.78 77.5 0.97 75.0 19.5 3.85 21.5 3.49 12.9 16.4 0.79 124.3 0.10 12.9 19.2 0.67 126.1 0.10 0.0 9.2 0.00 49.9 0.00 0.0 0.0 0.00 83.3 0.00 25.0 16.2 1.54 87.7 0.29 100.0 99.5 1.01 69.0 1.45 0.0 0.5 0.00 22.6 0.00 100.0 99.3 1.01 7.6 13.09 0.0 0.5 0.00 33.3 0.00 0.0 0.5 0.00 33.3 0.00 0.0 0.5 0.00 33.3 0.00 0.0 0.5 0.00 33.3 0.00